

Attorney or Party Name, Address, Phone & Fax Nos.,  
State Bar No. & Email

Main Document FOR COURT USE ONLY  
Page 1 of 8

Benjamin Heston  
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Nexus Bankruptcy  
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Newport Beach, CA 92660  
Phone: (951) 290-2827  
Email: [ben@nexusbk.com](mailto:ben@nexusbk.com)

☐ Debtor(s) appearing without an attorney

☒ Attorney for Debtor(s)

**United States Bankruptcy Court  
Central District of California - Riverside Division**

In re:  
Joseph D Lujan

CASE NO.:

CHAPTER: Chapter 7

**DECLARATION BY DEBTOR(S)  
AS TO WHETHER INCOME WAS RECEIVED  
FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION  
DATE**

[11 U.S.C. § 521(a)(1)(B)(iv)]

Debtor(s).

[No hearing required]

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

☐ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)

☒ I was not paid by an employer because I was either self-employed only, or not employed.

Date: 11/30/2022  
Joseph D Lujan  
Printed name of Debtor 1

[Signature]  
Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

2. ☐ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

☐ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)

☐ I was not paid by an employer because I was either self-employed only, or not employed.

Date: \_\_\_\_\_  
Printed name of Debtor 2

\_\_\_\_\_  
Signature of Debtor 2

8:48

BackIHSS Website - Login

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Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:00

Pay Period: 10/01/2022 - 10/15/2022

Submit Date: 11/01/2022

Status: Payment Deposited

Status Date: 11/02/2022

Net Amount: \$779.13

Email CopyDownload Pay Stub

Payment Details

8:41

BackIHSS Website - Login

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Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:00

Pay Period: 06/01/2022 - 06/15/2022

Submit Date: 07/01/2022

Status: Payment Deposited

Status Date: 07/05/2022

Net Amount: \$769.62

Email CopyDownload Pay Stub

Payment Details

8:49

BackIHSS Website - Login

MenuIHSSLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:38

Pay Period: 11/01/2022 - 11/15/2022

Submit Date: 12/01/2022

Status: Payment Deposited

Status Date: 12/02/2022

Net Amount: \$788.09

Email CopyDownload Pay Stub

Payment Details

8:48

BackIHSS Website - Login

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Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:38

Pay Period: 10/16/2022 - 10/31/2022

Submit Date: 11/01/2022

Status: Payment Deposited

Status Date: 11/02/2022

Net Amount: \$857.58

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Payment Details

8:41

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Earnings	Current	Year-to-Date
Regular	\$930.00	\$11,374.32
Overtime	\$0.00	\$0.00
Total Gross	\$930.00	\$12,323.82
Net Pay	\$769.62	\$10,937.82

Deductions	Current	Year-to-Date
Federal	\$0.00	\$0.00
State	\$0.00	\$0.00
FICA	\$57.66	\$764.08
Medicare	\$13.49	\$178.70
SDI/DIEC	\$10.23	\$135.56
Dues	\$49.00	\$157.66
Health Trust	\$30.00	\$150.00
Total Deductions	\$160.38	\$1,386.00

8:49

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Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:00

Pay Period: 11/16/2022 - 11/30/2022

Submit Date: 12/01/2022

Status: Payment Deposited

Status Date: 12/02/2022

Net Amount: \$848.62

Email CopyDownload Pay Stub

Payment Details

8:44

BackIHSS Website - LoginLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 58:38

Pay Period: 07/01/2022 - 07/15/2022

Submit Date: 08/01/2022

Status: Payment Deposited

Status Date: 08/02/2022

Net Amount: \$767.50

Email Copy

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Payment Details

Timesheet Details

Payment Details8:43

BackIHSS Website - Login

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:38

Pay Period: 06/16/2022 - 06/30/2022

Submit Date: 07/01/2022

Status: Payment Deposited

Status Date: 07/05/2022

Net Amount: \$857.59

Email Copy

Download Pay Stub

Payment Details

Timesheet Details

8:45

BackIHSS Website - Login

MenuIHSSLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:38

Pay Period: 08/01/2022 - 08/15/2022

Submit Date: 09/01/2022

Status: Payment Deposited

Status Date: 09/02/2022

Net Amount: \$788.09

Email CopyDownload Pay Stub

Payment Details

8:45

BackIHSS Website - Login

MenuIHSSLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 62:00

Pay Period: 07/16/2022 - 07/31/2022

Submit Date: 08/01/2022

Status: Payment Deposited

Status Date: 08/02/2022

Net Amount: \$876.91

Email CopyDownload Pay Stub

Payment Details

8:46

BackIHSS Website - Login

MenuIHSSLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:38

Pay Period: 09/01/2022 - 09/15/2022

Submit Date: 10/02/2022

Status: Payment Deposited

Status Date: 10/04/2022

Net Amount: \$788.09

Email CopyDownload Pay Stub

Payment Details

8:46

BackIHSS Website - Login

MenuIHSSLogout

Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 59:00

Pay Period: 08/16/2022 - 08/31/2022

Submit Date: 09/01/2022

Status: Payment Deposited

Status Date: 09/02/2022

Net Amount: \$834.48

Email CopyDownload Pay Stub

Payment Details

8:47

Back

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Payment Details

Payment Overview

Recipient Name: JOSEPH LUJAN

Recipient ID: 0396654

Payment Type: IHSS

Claimed: 60:00

Pay Period: 09/16/2022 - 09/30/2022

Submit Date: 10/02/2022

Status: Payment Deposited

Status Date: 10/04/2022

Net Amount: \$848.62

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Payment Details

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